

THE SOUTH'S FIGHT FOR
RACE PURITY
by
Robert Wickliffe Woolley

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The South's Fight for Race Purity

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The direct effect of miscegenation on Southern white women is explained in the following story. It may offend the class which Charles Reade called "prurient prudes", but right is always right. The story is told in plain words. Otherwise it would be ineffective. A little while ago the New York Evening Sun editorially ascribed to one phase of miscegenation one third the number of blind children. The next day it printed the following letter from a distinguished New York physician:

To the Editor of The Evening Sun.

Sir: Why should not The Evening Sun, that "shines for all," justify its appellation by enlightening its readers as to the "particular cause" of practically all the blindness of the new born, instead of vaguely hinting at it in such terms that not one in 10,000 of its readers has the slightest inkling of what is meant?

The Credé method has been employed for twenty-eight years; it has not and never will materially diminish the sum total of blindness so long as the true nature and cause of the infection which causes blindness of the new born are covered up and concealed.

P. A. Morrow.

Dr. Morrow is right. Plain speech is necessary. He referred to only one, and a comparatively minor effect of miscegenation. To that hideous evil can be attributed 65 per cent. of the surgical operations performed on Southern white women, and thousands of babies born physically and mentally degenerated. This letter from a famous government doctor shows that conditions require publicity:

To the Editor, Pearson's Magazine.

Dear Sir: The person who tries to prevent rather than to cure disease makes himself unpopular and is criticized as an extremist and a theorist by many people.

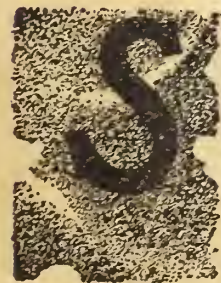
The person who discusses certain very delicate subjects is criticized by super-sensitive individuals whose horizon as respects modesty is so contracted as to make false modesty more important than human life.

Personally I see no escape from an ultimate frank and open discussion of the subject which forms the basis of this article, and the sooner that discussion takes place the more suffering will be prevented and the more human lives will be saved.

Many persons, even in medical and scientific work, will probably condemn you, but their condemnation is, I believe, negligible when compared with the ultimate potential good to be accomplished.

Charles Wardell Stiles.

The following story, plainly told, is a shocking revelation of the depravity of man and the thoughtlessness of youth.—EDITOR.



STALKING through the Southland, hand in hand with the negro and the mulatto, is the "Great Black Plague." Ten times as contagious as leprosy and more productive of morbidity and death, eventually, than tuberculosis, it works in secret because of the shame which overwhelms its victims, and it is to-day seriously

imperiling the very existence of the Anglo-Saxon blood. The social body is being defiled, sapped and weakened, and a proud race is all too close to the verge of committing involuntary suicide. It is rendering sterile many of the fairest and noblest women in Dixie, and is either killing outright or making hopeless invalids of many more; it is destroying unborn babes by the thousand and is causing thousands more to come into this

pursuit. It was a battle now, a battle to the end, with the odds against her.

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When Weatherby, with the rising wind drumming in his ears, floundering through slough and darkness and driving snow, first caught sight of the girl, she was deliberately lashing her long-bladed hunting-knife, bayonet-wise, to the barrel-end of her duck-gun. He waited, in an agony of apprehension, for Napoleon to come up with the rifles. The huge moose was already struggling to gain a foothold on the shelving and broken shore-rock. Any moment might be the last. For once little empty-headed Teddy Canfield had been right. She was "in need of a guardian," as that youth had facetiously expressed it. But had he come too late, after all!

Weatherby, separated from the boat by a ravine of rock and water, watched, helpless, powerless, second by second, praying for the guns. Then he saw the huge antlered body rise above the surface of the water. He could make out Isabel Anne, but only dimly. She seemed to be waiting, with her barrel-end ready. He could see it glimmer through the half-light. Then he saw that the moose, with one long, shuffling bound, was making the shore, dragging at his frenzied heels the small bateau, as though it were a thing of paper. It was then that Weatherby plunged hip-deep into the mud and water of the ravine-bottom that still separated him from the girl.

It was then, too, that Isabel Anne flung herself over the prow of the dragging boat, with one little cry, one unconscious shrill scream, while the great antlers lowered and the infuriated animal, once more come into the dignity and power of his natural element, turned on his puny enemy.

The girl watched the rushing head bear down on her and then swerve to one side with the unlooked-for weight of the "pointer." As the moose, entangled in the rope, plunged and struggled for an uncertain footing, sliding ponderously forward on his knees, she judged her distance quickly. Then she thrust with all her strength.

She knew the knife had gone into the furred flesh up to the hilt, even before the great carcass, emitting a half-rumbling roar, struggled to its feet. This time, as she leaped to the right, clear of striking antler and hoof, the

knife sank in well behind the shoulder. She could see the great knees quake, for a moment, and the blood flowing from the gaping mouth. But now she was weak and panting herself, asking if she could hold out to the end, wondering just what that end would be.

Yet still she waited, dimly conscious of the danger and the disadvantage of standing as she was on ground lower than her enemy's, dreamily disturbed at the lack of light, mistily remembering that whatever the end might be she had brought it on herself.

For one second the great looming shadow poised above her. Then it crashed down through the underbrush. As the girl swung off sharply, with one hand involuntarily clutching at a young balsam, a charging mountain of flesh swept past and knocked the gun from her hand. It left her unarmed and helpless. She could hear the weapon go rattling down the broken rock. Giving one short scream of abject fear and despair, she stood waiting, alone, for the end.

She heard, above the whine of the wind, the crackle of distant underbrush. From the water below came one short, gurgling moan—a moan that haunted her sleep for months afterward. Peering down through the darkness she understood. Her moose lay dead, stretched prone in six inches of the waters of Temagani.

She called aloud, then, in stark terror of the darkness, of the loneliness, of the Death that her own hand had brought into the world. She was afraid, terribly afraid. After all, she was a coward!

Weatherby, stumbling and panting down to her, found her crouched on a fallen pine tree, crying softly, bitterly, inconsolably.

"I want to go home!" she moaned, as he dropped on one knee beside her.

It was not until Napoleon Baudette came up with the launch that she seemed to waken to the world of realities about her. Then she turned to Weatherby.

It was her eyes, and not her voice, that told him it was always he who helped her out of her troubles.

"Take me home," she begged, weakly.

"On one condition," said Weatherby, quite soberly, as he muffled her in the camp-blanket Napoleon Baudette handed up from the launch.

"What is it?" she asked, vaguely, swaying toward him.

"That you marry me," he answered, taking her, unresisting, in his arms.

world degenerated, physically and mentally. And yet the land abounds with good, well-meaning persons who earnestly protest that this loathsome vampire must not be mentioned except to a physician and that the young must be kept absolutely in the dark as to its existence or its terrible effects. They enable it to thrive upon ignorance and thereby work a harvest for the most dangerous type of quack physician and the maker of destructive nostrums. Already they have given it a leeway, of which it has taken such marked advantage that the medical profession is alarmed and on the defensive.

There are many who will condemn the publication of an article dealing with this subject—the negro and social diseases—in any but a medical journal. The general reader rarely, if ever, sees one; the scientific and professional terms would be so much Greek to him if he did. The American Society of Sanitary and Moral Prophylaxis, which has established branches in a number of the large cities of the North and East, issues from time to time pamphlets setting forth the horrors of impure lives, but their circulation is necessarily very limited. Let me say right here that it is the duty of every father and mother, every young man and young woman, to read what such eminent physicians as Drs. Prince A. Morrow, of New York, Howard A. Kelly, of Baltimore, Robert N. Willson of Philadelphia, and J. Tabor Johnson, of Washington, have to say of the dangers of these diseases and of the awful consequences of the failure of parents to talk plainly to their children.

Indiana's Law

Indiana read the handwriting on the wall and recently she has placed upon her statute books a marriage law which has attracted the attention of leading sociologists and medical men of the old and the new world. It requires the State Board of Health to furnish to the several county clerks forms containing questions as to physical condition which must be answered by the persons about to wed. In part, it says: "Nor shall any license issue when either of the contracting parties is afflicted with a transmissible disease, or at the time of making application is under the influence of an intoxicating liquor or drug." The answers have to be sworn to.

The clerk must satisfy himself that deception is not being practiced, else the conse-

quences of his negligence are liable to react upon him. If he entertains any doubt whatever, he must refer the application to the circuit judge of his district, who is required to review the matter and render final decision—without cost to either of the applicants. If deceit or fraud of any kind be practiced in the procuring of the license, the marriage becomes void. Moreover, the law says:

"If persons resident of this State, with intent to evade the provisions, . . . go into another State and there have their marriage solemnized with the intention of afterward returning and residing in this State, and do so return and reside in this State, such marriage shall be void," and the contracting parties shall be subject to prosecution.

Let every State in the Union pass and enforce such a law and soon there will be little talk of small families and the advantages thereof. Many a physician knows from the lips of wives who brave the world childless to-day that hundreds of thousands of those who are accused of practicing race suicide would give all they possess if they could only gladden their firesides with babies. Social diseases are bringing about more wretchedness, breaking up more homes and playing more havoc among the young than any other known causes. Eliminate them and there will be such an exodus of house dogs to the kennels that the few remaining will be only badges of dishonor.

The Cause of Blindness

Just a year ago a leading magazine published an article written by Helen Keller, America's most distinguished victim of infantile ophthalmia, in which she quoted Dr. Morrow as follows:

"The cruelest link in the chain of consequences is the mother's innocent agency. She is made a passive, unconscious medium of instilling into the eyes of her new-born babe a virulent poison which extinguishes its sight."

We know that only when ignorance presides at the accouchement does this link materialize; as Miss Keller pointed out, it can be prevented by dropping into the eyes of the child, immediately after birth, a solution of nitrate of silver. The disease which produces this virulent poison does its most diabolical work when it makes barren the woman for all time, often causing her to be so mutilated that death alone brings relief from suffering, and renders impotent the

man. It is idle and wrong to speak of it and of its companion in destruction, the blood malady, as Nature's pruning knife. They are the Death Head at the feast where Future's health is drunk.

In a comparatively recent address, delivered in Boston, Dr. Morrow said that to the debit side of this blood disease should be placed 90 per cent. of locomotor ataxia, more than 75 per cent. of ocular paralyses, a large but indeterminate proportion of general paralysis, paraplegia and hemiplegia, and 80 per cent. of all cases of paresis—all affections of a serious nature and, for the most part, incurable. He declared that its bill of heredity and mortality is appalling; that it causes 42 per cent. of all miscarriages; that 60 per cent. to 80 per cent. of all children afflicted with it die before being born or shortly after birth, and that those who finally survive "are the subjects of degeneration and organic defects which are susceptible of transmission to the third generation."

Of gonorrhea, which virulent poison characterizes—caused by the coccus of Neisser—he said it was even a greater depopulating factor. To it, he stated, gynecologists charge "80 per cent. of all deaths from inflammatory diseases peculiar to women, more than 75 per cent. of the suppurative pelvic inflammations and 50 per cent. of all gynecological operations performed by surgeons, to say nothing of the large number of women who are permanently invalidated." He said further that from 10 per cent. to 30 per cent. of all blindness is caused by it and that 50 per cent. of all women infected with it are rendered permanently sterile.

Other Startling Results

Dr. J. Tabor Johnson made rather startling statements concerning this disease in an interesting paper read before the Medical Society of the District of Columbia in November, 1907. In part, he said: "Sociologists and those interested in the preservation and perpetuation of American families in our country have become alarmed over the constantly diminishing size of the American family. Legislatures in some of our States have appointed expert committees to investigate and report. Statisticians, both State and national, acknowledge that 'race suicide,' as the President of the United States has so aptly called it, is not only alarmingly frequent, but is on the increase. Dr. Engleman, of

Boston, stated in a public address in this city five years ago that the birth-rate of the American-born population was lower than that of any European country except France, and that the fecundity of American women was less than that of any other country."

Note carefully that Dr. Johnson dwells upon the word "American." In the Southern States the proportion of European-born population or of European women is still so small as to be hardly worthy of serious attention. The vast majority of whites there are Anglo-Saxons descended from the Cavaliers and Britons of humbler stock who came to this country in the seventeenth and eighteenth centuries. Imagine what it means if the birth-rate among them is really becoming smaller than in France, where, it is constantly being charged, more people are going out of this world than are coming into it.

"Dr. Ward, of New York, has insisted within the year," said Dr. Johnson, "that the number of children per marriage has decreased from 4.5 in the eighteenth century to 2.5 at the present time, and that while voluntary 'race suicide' is alarmingly prevalent there is still the great multitude who, through no wish of their own, are childless and who are constantly spending their time and money in seeking relief."

75 Per Cent. of Men Affected

This "great multitude" are victims of the coccus of Neisser. Dr. Johnson stated that one may safely say it is the most frequent of all the adult diseases. "The lowest estimate which we meet in recent literature," he says, "is that at least 75 per cent. of the male inhabitants of our cities, between the ages of eighteen and twenty-eight, have had, or now have, this disease. Its frequency is placed by many at a much higher rate, varying anywhere from seventy-five to ninety-five per cent. It is probable that the latter figure is more nearly correct than the former."

Dr. D. R. Hooker, chairman of the Committee on Sanitary and Moral Prophylaxis of the Medical and Chirurgical Faculty of Maryland, says the actual extent of the so-called social diseases is but vaguely known even by the members of the medical profession because of the lack of any available means of obtaining statistics about them. In a recently published report giving the results of investigations made by his committee, he states that in Johns Hopkins Hospital the

medical and surgical histories of males over twenty-one years of age were examined. Of these patients 60.8 per cent. admitted having been afflicted with one of the social diseases and the proportion of those having had the blood malady was only 10.9. In the Johns Hopkins Hospital Dispensary 1000 each of medical and surgical histories of males over twenty years old were investigated. They showed a past infection of 50.9 per cent. of social diseases, only 9.4 of which was from syphilis.

"It is to be understood," he said, "that the histories investigated were those of patients of various social grades and of all degrees of culture—some of the men were day laborers, others were tradesmen, and still others were gentlemen. Speaking generally, the patients were a motley crowd of about 4000 men, much the sort of indiscriminate crowd that is seen in railroad stations, in theaters or in any other public place. They would represent on a small scale our civil population as a whole, so it was thought by the committee that these figures would represent the percentage of venereal infection in the community at large. . . . Cognizance must be taken of the fact that, out of a sense of shame, men who had actually been infected would often deny the infection in responding to the doctor's question."

Dr. Hooker's committee examined the dispensary and hospital records of the forty-one hospitals in Baltimore and found that only seventeen of these afforded any opportunities for statistical research. The total number of cases of social diseases recorded in these seventeen was 6360. "Owing to the lack of available information in over one half our hospitals and dispensaries," he said, "these figures represent most inadequately the number of venereal patients actually treated in our public institutions in the year 1906."

In that same year there were reported in Baltimore 575 cases of measles, 1172 cases of diphtheria, 577 cases of scarlet fever, 175 cases of chicken-pox, 58 cases of small-pox, 1215 cases of typhoid fever, 465 cases of whooping-cough, 57 cases of mumps and 733 cases of tuberculosis—a grand total of 5047.

"Let us compare with it the number of cases of venereal disease reported by the committee," says Dr. Hooker, "3090 cases were reported in private practice and 6360 cases were recorded in the hospitals and dispensaries investigated, making a grand total

of 9450 cases. Opposed to this morbidity we have the sum total of 5047 cases representing the collective morbidity resulting from the other contagious diseases in the year 1906."

Baltimore is generally classified as a Southern city, and I have given the results of the investigations conducted there because the figures are the only reliable ones I have been able to obtain which were gathered below Mason and Dixon's Line. They disclose in a convincing manner a condition of which the average man or woman has never dreamed, and, coupled with the startling statements made by physicians elsewhere, should sound the death knell of secrecy in dealing with what the medical profession has come to designate as "The Great Black Plague." That name is peculiarly apt for the prevalence of social diseases in Dixie, because they find the negro and the mulatto fertile soil and a willing medium for their dissemination. The degree of morbidity produced by them among Afro-Americans—there are more than 7,000,000 in the South—is appalling. The fact that practically no colored person is ever cured of either of them, but is ever a menace to the health of the community, is still more appalling. It is one big reason why a determined fight upon miscegenation has been begun in Louisiana and is spreading to other Southern States. Ask any gynecologist or obstetrician of considerable practice in New Orleans, Atlanta, Memphis, Mobile, Charleston or Nashville as to the prevalence of this plague among negroes and the manner in which it is passed along to innocent and high-minded white women. I have, and their replies were startling and depressing. In every instance I stated that I did not care to know anything about the public woman or other woman of loose morals—I was after facts about decent, honest, clean-living women of all social stations.

The Negro's Part

Before starting upon my trip I was told by an eminent physician of Washington that 65 per cent. of all the women operated upon or treated in any way for pelvic troubles at Johns Hopkins Hospital were, or had been, afflicted with one of the social diseases. That would indicate a lamentable state of affairs at the top, because Johns Hopkins is the most expensive hospital in the South. I offered the figures as authentic to every physician interviewed and not one expressed

surprise. In fact, several told me that in their practice the percentage would run as high as seventy-five. But none had any figures, gathered either in hospitals or privately, with which to back up their estimates. They simply emphasized their belief that miscegenation was to blame for decidedly the major portion of the trouble.

Upon my return from the South I called on Dr. Howard A. Kelly, professor of gynecology at Johns Hopkins University, to get the "65 per cent." verified. He assured me that he had never given out any such figures and was not aware that any of his assistants had. Therefore, I cannot offer them as authentic, though at least two Johns Hopkins physicians have since assured me that they are approximately correct.

In discussing the health conditions of the negro before the Southern Medical Association at Atlanta in November, 1908, Dr. Seale Harris, of Mobile, a member of the faculty of the University of Alabama, stated that "not enough has been said regarding the physical deterioration which is certainly taking place in that race. It is undeniably true that tuberculosis, syphilis, typhoid fever, small-pox and other contagious diseases are much more prevalent among the negroes than among the whites. That these diseases are often transmitted to the whites by the negroes is well known to all physicians." In a paper read several years ago before the American Medical Association Dr. Harris dealt with the social diseases as predisposing causes of tuberculosis. He said he was strongly inclined to the opinion that the malady caused by the coccus of Neisser prepared the soil for the bacilli of consumption and therefore was the indirect cause of much tuberculous peritonitis. Dr. William Osler says: "Tuberculous peritonitis in America is a more common disease in the negro than in the white race, and recently collected statistics show that females predominate."

Dr. Harris told me a few weeks ago, in Mobile, that he believed the percentage of members of the colored race afflicted with social diseases to be greater than ever. He estimated that in his hospital work fully 90 per cent. of the women over sixteen years of age gave histories of one of these troubles and among the men they were practically universal. This discloses a degree of licentiousness which is shocking to the reader who knows not the unmoral character of the negro and the mulatto. The statement of

Dr. Harris was substantially repeated by Dr. Ernest S. Lewis, who has been for thirty years in charge of the gynecological work at the Charity Hospital in New Orleans, by Dr. F. C. Baldrige, of Huntsville, Ala., by Dr. F. C. Williams, secretary of the South Carolina Board of Health, and by Dr. W. S. Rankin and Dr. R. H. Lewis, of Raleigh, present and former secretaries respectively of the North Carolina Board of Health. It is well to repeat that these eminent physicians spoke only from personal experience. I talked with other reputable doctors who made even more startling statements.

The Increasing Death-rate

"It is a fact," says Dr. Seale Harris, "that before the war the negro death-rate for the South was less than that for the whites. As an illustration: in Charleston, South Carolina, from 1822 to the beginning of the war the average white death-rate was 25.98 per thousand; for the blacks, 24.05 per thousand. The same was true for all other Southern cities whose statistics I have seen. I have seen no statistics for the rural districts before the war, but while no doubt lower than the city death rates, the proportion as to the races was about the same. Now let us compare these statistics with those after the war, and we find in the city of Charleston, from 1865 to 1894, the average annual mortality for the whites was 26.77 per thousand; for blacks 43.29 per thousand."

In his annual report for the year 1908 Dr. W. C. Woodward, Health Officer of the District of Columbia, says: "The influence of the colored population of the District on its general death-rate is about as bad as usual. The colored population in 1907 made up 29.2 per cent. of the population, but contributed 42.79 per cent. of all the deaths. The colored death-rate was 28.22; the white was 15.55." The death-rates in other leading cities of the South for the same year were: Mobile—white 19.0, colored 31.1; New Orleans—white 20.1, colored 34.4; Louisville—white 15.6, colored 28.3; Savannah—white 17.9, colored 30.0; Baltimore—white 17.7, colored 31.8; Wilmington, N. C.—white 19.8, colored 32.6.

In spite of education, in spite of the vigilance of health officers, the negro is dying out. While the birth-rate is decreasing, the death-rate is steadily increasing. Scrofula and social diseases are so depleting his vitality that

he falls an easy prey to tuberculosis or other wasting and deadly maladies.

"It cannot be consistently argued," says Frederick L. Hoffman, in his "Race Traits and Tendencies of the American Negro," "that because the mortality from these diseases (scrofula and social diseases) is small, the facts brought out, therefore, are of less significance than those for consumption. It is because the disease is closely related to other diseases, principally consumption and an excessive infant mortality, that the rapid increase of scrofula and venereal disease among the freed people becomes a matter of the greatest social and economic importance. For the root of the evil lies in the fact of an immense amount of immorality, which is a race trait, and of which scrofula, syphilis and even consumption are the inevitable consequences. So long as more than one-fourth (26.5 per cent. in 1894) of the births for the colored population of Washington are illegitimate—a city in which we should expect to meet with the least amount of immorality and vice, in which at the same time only 2.6 per cent. of the births among the whites are illegitimate—it is plain why we should meet with a mortality from scrofula and syphilis so largely in excess of that of the whites. . . . It is not in the *conditions of life*, but in the *race traits and tendencies* that we find the causes of the excessive mortality. So long as these tendencies are persisted in, so long as immorality and vice are a habit of life of a vast majority of the colored population, the effect will be to increase the mortality by the hereditary transmission of weak constitutions, and to lower still further the rate of natural increase, until the births fall below the deaths and gradual extinction results."

The reason for the small death-rate among negroes before the Civil War was that they were slaves and others looked after their physical well-being. "The Great Black Plague" was almost unknown. Whenever it was discovered the victim was quickly isolated and cured, or prevented from imparting it to another. But once the shackles were removed they either forgot or deliberately disregarded the simplest rules of hygiene and the day of their doom began to break. Racked with disease as they are at the present time, hospital surgeons and physicians will tell you that it is almost impossible to get them to undergo any sort of treatment. The slightest favorable turn in their condition they mistake for a cure and go their way rejoicing; when

the trouble returns in worse form than ever they will drag their weary feet back to the clinics, only to find that temporary relief is the best that can be offered because their ailment has reached the incurable stage.

The Colored Housemaid

I was impressed by the fact that a mulatto physician of New Orleans, Dr. J. T. Newman, understood the situation better than most of the white physicians with whom I talked. Practically all of the latter were inclined to blame the negress, quadroon, octoroon, etc., of the public house for the deplorable existing conditions.

"I differ with them," said Dr. Newman. "A great deal of my practice is among the women of the underworld, both white and colored, and I do not hesitate to say that it has been my experience that of the two the colored women are the least offenders. White women often mistake liberty for license, whereas the colored women are afraid to. The chief colored offenders are the housemaid, the nurse and the chambermaid, many of whom pose as God-fearing women, but whose morality is only a pretense."

Only another bit of proof that the conclusions of many medical men that the average colored man or woman of African descent is unmoral rather than immoral. It should be borne in mind that as a rule the nurse, chambermaid or housemaid among negroes occupies a much higher social position than does this same menial among whites. She is the church worker. She takes a leading part in many social functions and is free enough in protesting that she is above suspicion.

Of course, Dr. Newman's words as to the difference in degree of crime and disease among blacks and whites of the underworld should not be taken too seriously. New Orleans's restricted district is unique in this country. All women of disrepute, no matter what their color or nationality, are housed in a territory bounded by certain streets and there they are practically unmolested, unless they commit some such crime as theft or murder. In describing it in the Chicago "Tribune," the late Raymond Patterson said there was not so much concentrated depravity outside of Cairo, Egypt. No one with whom I talked in New Orleans denied it.

"It is an ugly cancer," said a police officer, "but we have the satisfaction of knowing that it is not diffuse. There is not such a thing

as a street woman in this city. A man's wife or sister or daughter may walk abroad at any hour with a great degree of safety. How many other big cities of this country can offer as much?"

The South's Need

In plain English, the crying need in the South to-day is a complete breaking up of the congress of white men with colored women. For at least a decade there has been a gradual trend toward segregation. The gratifying results may be seen in the increasing number of dark skins on the newly born babes. But the eradication of the evil is by no means in sight, if the present easy-going conditions are to continue. Local prophylactic movements have had little effect upon the general situation. Because of the recklessness of college boys and young men, many of the best and purest women in the whole of Dixie are being ruined physically or being made to suffer temporary torture undeservedly. It is a well-established fact that many of the youth of the South become early afflicted through intimacy with colored girls or women, that they frequently submit to treatment by quack doctors who brazenly advertise a speedy cure, whereas a six months' treatment is generally needed, or treat themselves with one of the many nostrums exploited in the advertising columns of the daily newspapers. They believe they have been permanently relieved and marry innocent, pure women. It soon becomes evident that they had no business taking such a step, but—it is too late. No matter which one of the social troubles develops, the chances are at least two to one that the poor girl is doomed to pass the remainder of her days an invalid or at least childless. Not infrequently there are complications which bring a speedy death. It is often charged that if the white men did not become infected as at present, there would be white women on hand to do the work. I think the testimony of leading physicians all over the country who have studied this question that such would not be the case because a fair proportion of the whites will submit to treatment and practically all of the blacks and mulattoes decline or neglect to is sufficient answer. But that is a bit beside the main question.

As I stated in my first article, Louisiana has determined to so improve upon the anti-concubinage law enacted by her last legislature that it will become an absolute anti-miscegenation measure, making a single act

of misconduct a felony punishable by imprisonment and hard labor. With the clause making it incumbent upon every judge of a district court to instruct each grand jury to investigate and return an indictment whenever evidence of misconduct is discovered in full force, much bigger results than have yet been reported will be speedily obtained. I am reliably informed that the chances for securing the passage of such a law in South Carolina are excellent. This will mean a tremendous step forward in the two States where the heavy hand of miscegenation has been most felt. It will mean the passing of the yellow skin in a large measure and the return of the African type; it will mean a fair chance for white women, many thousands of whom are to-day walking from the altar like so many flies into the spider's web. Some fine day these two States will go a step further and set other Southern States a tremendous pace by adopting the marriage law of Indiana.

Still there is big work to do. Observations show that yellow skins are most numerous in and around towns where colleges are located. Pedagogues and physicians have given this phase of the question a great deal of thought. President E. B. Craighead, of Tulane University, writes me that for some years he has delegated a physician to lecture the students of the freshman class upon the evils of miscegenation—and then leaves the whole matter to the boys themselves. This is a step toward the testing of a scheme which Dr. Charles Wardell Stiles, chief of the Division of Zoölogy of the Public Health and Marine Hospital Service, strongly advocates. During his many years of work among the poor whites of the South, Dr. Stiles has had much to do with the colleges and universities of that section and with Southern boys. In the latter he believes firmly. He says he has never seen their like elsewhere in this country or anywhere in Europe.

Putting Boys on Honor

"Put a Southern boy on his honor," he said to me one day recently, "and you will get results in a hurry. Show him what the consequences of his indiscretions are sure to be, what it means to the woman whom he will one day make his wife for him keep clear of the negro. Then get his word that he will do so. In a few years miscegenation would be considered such a disgrace that a man

would almost rather die than to be found guilty of it."

In a nutshell, Dr. Stiles proposes that the boys of each college and university in the South, having been duly instructed in the evils and horrors of miscegenation, shall be asked to make oath that they will have no knowledge of negro or mulatto women during their stay at the respective institutions, and that whether or not the oath is adhered to shall be left to the student body. On my trip through the South I told a number of educators of it and they expressed themselves as being heartily in favor of its adoption. It bids fair to be adopted by a number of institutions of learning within the next year. I was told that an anti-miscegenation club was recently formed by certain men at Natchez, Miss., and that its membership is growing rapidly. Boys are more impressionable than adults; therefore, they should prove more susceptible of such moral improvement, or rather it should be easier to keep them on high sanitary ground. Of course, all talk of teaching the negro or mulatto girl to withstand the advances of the white youth is simply chimerical twaddle.

There are many worthy professors and physicians who stoutly maintain that in simply warning Southern boys against the colored woman, as a preliminary prophylactic work, a compromise with the devil is being made; that what should be taught and required is outright social purity. Theoretically, this admits of no argument; practically, it won't work—yet. It is hard to read the lectures delivered to the freshmen of the University of Pennsylvania by Dr. Robert N. Willson or some of the papers of Dr. Howard A. Kelly and not conclude that the one thing to do is to make a mighty effort to take the great big Utopian step at once. The fact is the negro must first be eliminated socially—and he will be. Meanwhile, the advice of Dr. A. L. Wolbarst, of New York, may well be followed.

"Educate the men, young and old, to the dangers of professional and clandestine prostitution, and the fight is half won," he says. "Educate the women, old and young, and clandestine prostitution will receive its death-blow. Educate the rising generations that they may know better than their predecessors what they must avoid, and how to do it."

[James K. Vardaman, former Governor of Mississippi, will discuss another phase of this depraved miscegenation in the March issue of this Magazine. He thinks this the most important problem which the American people must solve. He tells what it means to the South, what it will mean to the North, and what remedy must be applied to preserve the health of innocent, high-spirited women and to halt the constant increase of the unmoral negroid population.]



She felt his scrutiny, but she thought
he stood there by accident



The Surrender

By Oscar Graeve

Illustrations by J. N. Marchand

SOPHIE WENDEL stood on the ferryboat's rear deck of evenings, after her long-inclosed day's work, eager for the air fresh from the sea. And it was here that for the first time in her life a man noticed her. He stood close beside her the first night she was aware of his presence, occasionally glancing down at her as she leaned on the rail looking up and down the bay spangled with a million lights. She felt his scrutiny, but she thought he stood there by accident. After that, however, she noticed that he sought her out to stand beside her. At first, she was frightened; she tried to avoid him, but later she admitted to herself, reluctantly, that she had come to look for and expect him. On nights when he did not come, she wondered, a little vaguely, if he were ill, if anything had happened.

Then came the night he spoke to her, merely saying: "Nice evening," or something of the sort which Sophie did not hear. With flaming cheeks she quickly moved away. The next morning he came to her again and seemed

about to speak, and again, elbowing her way through a gap in the crowd, she evaded him.

She hurried across the Battery and up along Greenwich Street to the place where she worked—a small wholesale hardware house. All the way she wondered if she were glad she had escaped him, if it would not have been better to have allowed him to speak to her, not once but many times—to be her friend if he wished, she had so few.

She nodded good-morning to her office companions, a gray bookkeeper and the "boss," and took her seat at the desk ready to begin her work writing bills, checking costs and figuring up profits. For five years she had been seated at this desk, six days a week, eight hours each day, doing the same dead clerical work, grown as familiar and uninteresting as the enameled cloth surface of the flat desk before her. Many times, shrinkingly, she counted up the number of months, of days, even of minutes, that she had spent here earning just enough to keep herself and her small brother.

This morning the work was piled high awaiting her: letters, bills, memorandums, but she could not seem to get started. She

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